Successful Community-Based Recruitment Strategies for Rural Washington – A Synopsis

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Recruitment Planning and Preparation

- Document the Need – provider inventory, provider survey, medical staff development plan which is updated annually
- Define the Opportunity in writing/create Practice Profile to be used in promotional materials
- Define the Candidate Profile – level of training, certification, skills, personality traits
- Organize the Recruitment Team: team lead, recruitment/reception committee
Recruitment Planning and Preparation, con’t

- Have a boiler plate contract in place at start of search
- Pre-visit idea of compensation package
  - Facilitates timely offering of a contract
- Adequate promotional materials – most important part
  - Develop a DVD (use local CC students)
  - Use testimonials of physicians and their families
  - Job postings – info as a “footer”
- Develop realistic expectations
  - Understand the recruitment cycle
  - Understand competitive nature of recruitment
Recruitment Planning and Preparation, con’t

- Financing the Recruitment Search– direct costs of search firms, advertising, posting fees, placement fees, promotional materials/DVD
- Site Visits – provider and spouse, hotel, rental auto
- Financial support to new provider – salary and benefits package including health insurance, moving expenses, CPE, vacation, signing bonus, local loan repayment incentive
Finding the Right Candidate

- Matching – a successful process is one that will recruit providers who meet your communities/organizations needs and one that will meet the professional, personal, and family needs of the provider.
- A good matching process can ensure retention.
- Screening – process to determine mutual interest:
  - Community information packet
  - Provider’s interest and qualifications
Finding the Right Candidate, con’t

- Interview – do at length over the phone prior to the visit
  - Candidates more at ease on the phone
  - Makes on-site visit more pleasurable for candidate

- Who should do the interview?
  - Consider a lay person initially followed by the clinicians

- Interview the spouse of significant other prior to visit

- Ask open ended questions
Finding the Right Candidate, con’t

- Background/Credentials Check
  - Precede site visit
  - “Authorization to release information” form
  - Reference checks – sometimes more than 2–3 will be needed

- What does CFHC do now for credentials check?
Conducting Site Visit and Follow-Up

- Phone call 2 wks prior to set up visit activities
- Develop a visit agenda
- Review info gathered in the matching process
- Conduct visit over a weekend
  - Visits of less than a day rarely work well
- Pay for all visit expenses – reimburse promptly if need be
- Visit content: talk to other providers, see facility, see hospital, tour community, talk to realtor, meet with school officials
Conducting Site Visit and Follow-Up

- Site visit general rules:
  - Don’t plan too much – leave some free time,
  - remember spouse and children’s needs
  - consider dietary needs
  - leave time for discussing compensation/contractual sticking points
  - Provide sample contract
  - End visit on positive note
  - Begin follow-up activities immediately
Implement a Visit Follow-up Plan
- Call within a day or two following the visit to Thank and to see if they have other questions
- Verbally indicate your desire to offer candidate a contract (if that’s what you want)
- Continue follow-up calls until provider has made a decision
- Other recruitment committee people send written notes of appreciation
- After a few weeks, offer a return visit
Successful Recruiting Measured by Retention

- Retention begins with the first contact
  - Honesty about negatives as well as positives builds trust
- Retention Plans
  - Retention Committee
  - Thorough orientation program – hospital, clinic, nursing home etc.
  - Introductions to others who will assist the provider
  - Develop a process to monitor the provider and family’s satisfaction with their new job/community.
    - Implement the “double buddy system”
    - Provide needed recognition/appreciation – show “active caring”
    - Make providers feel involved and in control of their workplace
    - Directors need to be involved to build provider loyalty
    - Continue above for one year until provider integrated into the community